

U.S. Embassy Georgetown

100 Young and Duke Streets, Kingston, Georgetown



2015 Youth Ambassadors Program: Caribbean

Adult Participant Application

Instructions for completing this application: Please fill out the application and answer all questions carefully and completely, in English. The information you provide on this application will provide the basis for selecting participants for this program. Semi-finalists will be contacted for an in-person interview.

Adult applicant must:

- ✓ Be a citizen and live in Guyana (applicants with dual U.S. citizenship will not be considered);
- ✓ Be teacher, trainer, and/or community leader who work with youth;
- ✓ Have proficiency in English;
- ✓ Demonstrate positive leadership and service;
- ✓ Exhibit a high level of open-mindedness, flexibility, and interpersonal skills;
- ✓ Have the ability to work cooperatively in a team and tolerate the opinions of others; and
- ✓ Be willing to take on the role of chaperone, exchange participant, and commit to the continued mentorship of youth participants after their return home.
- ✓ Have little or no previous exposure to the U.S.

Please submit the following required documentation listed below, along with your application:

- o A copy of your birth certificate
- o A copy of your curriculum vitae
- Two references

Please submit applications by April 30, 2015

Applications should be submitted to:

Public Affairs Section U.S. Embassy Georgetown 100 Young and Duke Streets Kingston, Georgetown

OR

Via E-mail to: PDGeorge@state.gov

If you have any questions, please feel free to contact:

Aretha Majeed Bobby Adelson
U.S. Embassy Georgetown U.S. Embassy Georgetown

100 Young and Duke Streets
Kingston, Georgetown

100 Young and Duke Streets
Kingston, Georgetown

100 Young and Duke Streets
Kingston, Georgetown

Telephone: 225-4900 Ext: 4018 Telephone: 225-4900 Ext: 4102 E-mail: PDGeorge@state.gov E-mail: PDGeorge@state.gov

There is no application fee. The United States Government will pay for all costs to participate in the program, including international travel to and from the United States, orientations, visa fees, and the exchange activities in the United States, including meals and lodging.

Youth Ambassadors Program - Adult Mentor Application

Youth Ambassadors Program: Caribbean

Adult Participant Application

recent passportsize photograph PERSONAL INFORMATION here Name_____ Last (Family) First Middle Current Address Home Phone Mobile Phone Date of Birth (Month/dd/yyyy) ______ Age____ City and Country of Birth _____ Country of citizenship or permanent legal residence Gender [] Male [] Female **Passport Information** Do you have a valid passport? [] Yes [] No If yes, please attached a copy of your passport Passport Number _____ Expiration Date (dd/mm/yyyy) Issuing Country _____ **Travel Information** Have you ever traveled to the United States or another country? [] Yes [] No If yes, please provide a brief description of dates, length and nature of your stay(s): PROFESSIONAL INFORMATION, EDUCATION, AND ACTIVITIES **Please attach a CV or one page summary of your work experience** **Professional Information** Name of Current Employer _____ Job Title _____ How long at this job: ____ Address

Paste or staple a

Youth Ambassadors Program - Adult Mentor Application

Email ______

Telephone _______

Supervisor's Name ____

Supervisor's Phone

Highest Degree/Diploma earned: When (m	onth/year) School/Institution
name	
List other languages you have studied belo	ow.
Language	Number of years studied
Language	Number of years studied
Activities	
	lar, community, hobbies, clubs) in which you participate, how long ards or honors. Use additional space as needed.
SHORT ESSAYS: Please respond to the follo	wing short essay questions in one paragraph
	owing short essay questions in one paragraph am? Why do you want to spend three weeks with teenagers from
What motivates you to apply to this progra	
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Youth Ambassadors Program – Adult Mentor Application

Describe a time and/or situation when you assu	umed a leadership role, if possible, with youth.
What do you find to be the most challenging th	ning about working with youth, and how have you dealt with it?
Discuss your commitment to continuing work i program will benefit your community.	in your country and your ideas for how your participation in this
participate in ALL program activities in the Uni	ation is true and I agree that if chosen to participate, I will ted States and my country, including the pre-departure erstand that I must remain with the program throughout the
Applicant Signature	n the United States during the program is not permitted. Date
Department of State, including any agency, clie part, in all forms and media, for distribution to further consent to the reproduction or use of t	photographs and video taken of, or including me, by the ent, publication or other organization or institution in whole or in the general public for the purposes of publicity and promotion. I the photographs/information with or without my name, and ek copyright of the photographs/information in their name.
Applicant Signature	Date

YOUTH AMBASSADORS PROGRAM: Caribbean

Reference
Applicant Name:
For the Applicant: Please submit two references with your application. The forms should be from a supervisor, professor, or other professional colleague outside your family who knows you well. The form must be completed in English. You may submit this form in paper with your application OR your reference can return the signed and completed form to: Public Affairs Section U.S. Embassy Georgetown 100 Young and Duke Streets Kingston, Georgetown OR Via E-mail to: PDGeorge@state.gov.
For the person provoving reference: The person named above is applying to take part in the Youth Ambassadors Program, a three-week exchange program in the United States for students and adult mentors. The selected participants will be in a challenging academic environment and intensive leadership training. To succeed, the participants must be highly motivated, and be able to adjust to living and working with people of different social and cultural backgrounds. We value your honest assessment of the applicant in helping us select the most appropriate participants. If you would like to add additional comments, we encourage you to do so. Your answers will remain confidential.
Please indicate your opinion of this applicant's ability to meet the challenges of this program I strongly recommend this applicant I recommend this applicant I have minor reservations about recommending this applicant I have major reservations about recommending this applicant I do not recommend this applicant
How long, and in what context or capacity, have you known this applicant?
What are the applicant's strengths?
What are the professional or personal areas in which this applicant needs improvement?
Please describe the applicant's behavior with respect to youth, peer relationships, responsibility, and work activities.
Do you think the applicant would adapt well to unfamiliar environments and new situations? Why or why not?
Name (printed)
Signature Date